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PTO/SB/01 (10-00)

Approved for use through 10/31/2002 OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

EN11343

First Named Inventor

LLOYD

COMPLETE IF KNOWN

Application Number

/

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SPEAKERPHONE ACCESSORY

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--|
| | | |

[Page 1 of 2]

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☐ Customer Number or Bar Code Label ☐ OR ☒ Correspondence address below

Name Philip H. Burrus, IV

Address Intellectual Property Department

Address 8000 West Sunrise Boulevard - Room 1610

City Fort Lauderdale

State Florida

ZIP 33322

Country United States

Telephone (770) 338-3227

Fax (847) 761-1288

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

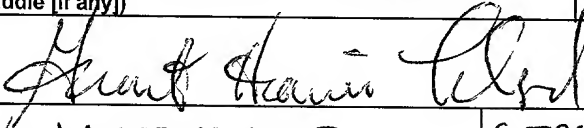
(first and middle [if any])

GRANT HARRIES

Family Name

or Surname

LLOYD

Inventor's
Signature

Date 10/30/01

Residence: City

LAWRENCEVILLE

State GEORGIA

Country US

Citizenship

US

Mailing Address

1825 RACQUET CLUB CIRCLE

Mailing Address

City LAWRENCEVILLE

State GEORGIA

ZIP 30043

Country UNITED STATES

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

CHARLES S.

Family Name
or Surname

BAXTER

Inventor's
Signature

Date 10/30/01

Residence: City

LAWRENCEVILLE

State GEORGIA

Country US

Citizenship

US

Mailing Address

3250 SWEETWATER ROAD - APARTMENT 1621

Mailing Address

City LAWRENCEVILLE

State GEORGIA

ZIP 30044

Country UNITED STATES

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → +

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

PAUL JAMES

FAERBER

Inventor's
Signature

Paul James Faerber

Date

Residence: City

LAWRENCEVILLE

State

GA

Country

USA

Citizenship

USA

Mailing Address

1365 WATERCRESS CIRCLE

Mailing Address

City

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State

GEORGIA

ZIP

30043

Country

UNITED STATES

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

DAVID

TOWNSEND

Inventor's
Signature

Date

Residence: City

VILLAGE OF LAKEWOOD

State

IL

Country

USA

Citizenship

USA

Mailing Address

7411 FAIRWAY DRIVE

Mailing Address

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IL

ZIP

60014

Country

USA

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

ZIP

Country

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 2 of 22

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

PAUL JAMES

FAERBER

Inventor's
Signature

Date

Residence: City LAWRENCEVILLE

State GA

Country USA

Citizenship USA

Mailing Address 1365 WATERCRESS CIRCLE

Mailing Address

City LAWRENCEVILLE

State GEORGIA

ZIP 30043

Country UNITED STATES

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

DAVID

TOWNSEND

Inventor's
Signature

Date

Residence: City VILLAGE OF LAKEWOOD

State IL

Country USA

Citizenship USA

Mailing Address 7411 FAIRWAY DRIVE

Mailing Address

City VILLAGE OF LAKEWOOD

State IL

ZIP 60014

Country USA

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT,
NOT ACCOMPANYING
APPLICATION**

| | |
|------------------------|---------|
| Application Number | |
| Filing Date | |
| First Named Inventor | LLOYD |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | EN11343 |

I hereby appoint:

☐ Practitioners at Customer Number OR

Place Customer
Number Bar Code
Label here

☒ Practitioner(s) named below:

| Name | Registration Number |
|----------------------|---------------------|
| Philip H. Burrus, IV | 45, 432 |
| Scott Kevin Pickens | 34, 696 |
| | |
| | |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

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OR

| | | | | | |
|---|--|-------|--|-----|--|
| <input type="checkbox"/> Firm or Individual Name | | | | | |
| Address | | | | | |
| Address | | | | | |
| City | | State | | ZIP | |
| Country | | | | | |
| Telephone | | Fax | | | |

I am the:

☒ Applicant.

☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|---------------------|
| Name | PAUL FAERBER |
| Signature | <i>Paul Faerber</i> |
| Date | 30 Oct '01 |

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT,
NOT ACCOMPANYING
APPLICATION**

| | |
|------------------------|---------|
| Application Number | |
| Filing Date | |
| First Named Inventor | LLDYD |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | EN113A3 |

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

| Name | Registration Number |
|----------------------|---------------------|
| Philip H. Burrus, IV | 45, 432 |
| Scott Kevin Pickens | 34, 696 |
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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| Address | | | | |
| Address | | | | |
| City | | State | | ZIP |
| Country | | | | |
| Telephone | | Fax | | |

I am the:

☒ Applicant.

☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|----------------|
| Name | Charles Baxter |
| Signature | Charles Baxter |
| Date | 10/30/01 |

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Application Number

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First Named Inventor

LLOYD

Group Art Unit

Examiner Name

Attorney Docket Number

EN11343

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| Telephone | | Fax | | | |

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☒ Applicant.

☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|----------------|
| Name | David Townsend |
| Signature | [Signature] |
| Date | 10/30/01 |

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| First Named Inventor | LLOYD |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | EN11343 |

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| Address | | | | | |
| Address | | | | | |
| City | | State | | ZIP | |
| Country | | | | | |
| Telephone | | Fax | | | |

I am the:

☒ Applicant.

☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|-----------------------|
| Name | Grant Lloyd |
| Signature | <i>Grant H. Lloyd</i> |
| Date | 6/30/01 |

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